

FEB 17 2005

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FAX FILING IN U.S. PATENT & TRADEMARK OFFICEDATE: February 17, 2005

TIME: _____

TO:	Examiner Debra F. Charles	FAX NO.:	1-703-872-9306
FROM:	Kenneth N. Nigon	ADMIN. ASST.:	Tonya M. Berger
APPLN. NO.:	09/742,791	ATTY. DOCKET NO.:	SCG-010US
TITLE OF APPLN.: METHOD AND APPARATUS TO FACILITATE COMPETITIVE FINANCING ACTIVITIES AMONG MYRIAD LENDERS ON BEHALF OF ONE BORROWER			
FILING DATE:	December 20, 2000	ART UNIT:	3628
FIRST INVENTOR:	Stephen J. Schmid	CONF. NO.:	8455
TITLE OF DOCUMENT (and List of Attachments): Transmittal and Request for Withdrawal as Attorney			
or Agent and Change of Correspondence Address			

Total Number of Pages: 3 (including this form)**COMMENTS****CONFIDENTIAL AND PRIVILEGED ATTORNEY/CLIENT INFORMATION**

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PTO/SB/21 (09-04) (AW 10/2004)

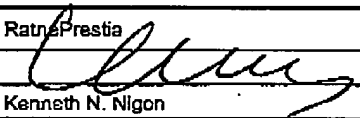
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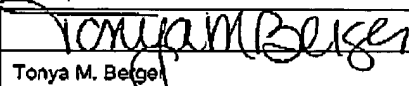
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/742,791
	Filing Date	December 20, 2000
	First Named Inventor	Stephen J. Schmid
	Art Unit	3628
	Examiner Name	Debra F. Charles
Total Number of Pages in This Submission 2		Attorney Docket No. SCG-010US

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Remarks:		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT			
Firm Name	RatnerPrestia		
Signature			
Printed Name	Kenneth N. Nigon		
Date	February 17, 2005	Registration No.	31,549

CERTIFICATE OF TRANSMISSION / MAILING			
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Signature			
Typed or Printed Name	Tonya M. Berger	Date	February 17, 2005

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**REQUEST FOR WITHDRAWAL
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Application Number:	09/742,791
Filing Date:	December 20, 2000
First Named Inventor:	Stephen J. Schmid
Art Unit:	3628
Examiner Name:	Debra F. Charles
Attorney Docket Number:	SCG-010US

**To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number **23122**

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are: non-payment of fees. The Applicant has been notified of the request for withdrawal by letters dated January 13, 2005 and February 17, 2005.

CORRESPONDENCE ADDRESS

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:
- ☐ The address associated with Customer Number:
- OR

☒ Firm or Individual Name: Mr. Stephen J. Schmid

Address: 51 Summit Road

Address:

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State: PA

Zip: 19355

Country: US

Telephone: (610) 420-7657

Fax:

Signature:

Name: Kenneth N. Nigon

Registration Number: 31,549

Date: February 17, 2005

Telephone Number: (610) 407-0700

Note: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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